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**\*BIBDATASHEET\***

CONFIRMATION NO. 7081

Bib Data Sheet

SERIAL NUMBER 10/659,345	FILING DATE 09/11/2003  RULE	CLASS 405	GROUP ART UNIT 3673	ATTORNEY DOCKET NO. MR3241-3
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APPLICANTS

Charles L. Fuller, Columbia, MD;

\*\* CONTINUING DATA \*\*\*\*\*  
 NONE, *full*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
 NONE, *full*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 12/04/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MD	SHEETS DRAWING 5	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after				
Verified and Acknowledged <div style="display: flex; justify-content: space-around;"> <div> <i>Salda</i>            Allowance            Examiner's Signature         </div> <div> <i>full</i>            Initials         </div> </div>				

ADDRESS  
 04586  
 ROSENBERG, KLEIN & LEE  
 3458 ELLICOTT CENTER DRIVE-SUITE 101  
 ELLICOTT CITY , MD  
 21043

TITLE  
 Reconfigurable barrier system

FILING FEE  RECEIVED 375	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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